PTO/SB/21 (09:04)

Underthe Pane	erwork Reduction Act of 1995 no	persons are required	U.S. P	· · · · · · · · · · · · · · · · · · ·	d for use through 07/31/2006. OMB 0651-0021 emark Office; U.S. DEPARTMENT OF COMMER imation unless it displays a valid OMB control num		
"OFFE	UEMARK	CHALLE MAN	Application Number		09/888,734		
TRANSMITTAL FORM  (to be used for all correspondence after initial filling)			Filing Date		June 25, 2001		
			First Named Inventor		Bruce J. ROSER		
			Art Unit		1651		
			Examiner Name		F. Prats		
Total Number of Pages in This Submission 13a			Attorney Docket Number		559662000101		
	EN	CLOSURES	(Check all	that apply	/)		
	mittal Form (1 page + or fee processing)	Drawing(s)			After Allowance Communication to TC		
Fee	Attached	Licensing-related Papers			Appeal Communication to Board of Appeals and Interferences		
Amendmer	nt/Reply	Petition			X Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) (23 pages)		
After	Final	Petition to Convert to a Provisional Application			Proprietary Information		
Affid	avits/declaration(s)	Power of Attorney, Revocation Change of Correspondence Address			Status Letter		
x Extension	of Time Request (1 page)	Terminal Dis	claimer		X Other Enclosure(s) (please Identify below):		
Express Abandonment Request		Request for Refund			Evidence Appendix Attachments (total 11 pages);		
Information	n Disclosure Statement	CD, Number of CD(s)			Return Receipt Postcard		
Certified Copy of Priority Document(s)		Landscape Table on CD		CD			
Reply to Missing Parts/ Incomplete Application		Remarks					
Reply to Missing Parts under 37 CFR 1.52 or 1.53		Customer No. 25225					
		-					
	SIGNATI	JRE OF APPLICA	ANT, ATTO	RNEY, OR	AGENT		
Firm Name	MORRISON & FOE	RSTER LLP					
Signature Cate H. Wurushi							
Printed name	Kate H. Murashige						
Date	July 22, 2005			Reg. No.	29,959		

I hereby certify that this corre	espondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in
an envelope addressed to: M	lail Stop Appeal Brief – Patents, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450,
on the date shown below.	$\mathcal{M}$
Dated: July 22, 2005	Signature: Marian L. Christopher)

PTO/SB/17 (12-04v2)
Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE to a collection of information unless it displays a valid OMB control number. JUL 2 5 2005

FEE TRANSMITTAL For FY 2005  Applicant coins small entity status. See 37 CFR 1.27  At Unit 1651  TOTAL AMOUNT OF PAYMENT (\$) 1.520.00  Applicant coins small entity status. See 37 CFR 1.27  At Unit 1651  TOTAL AMOUNT OF PAYMENT (\$) 1.520.00  Attomey Docket No. 559962000101  METHOD OF PAYMENT (check all that apply)  Check Credit Card Money Order None Other (please identify):  X Deposit Account Depose Account Number 03-1952 Depose Account Name Morrison & Foerster LLP  For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  X Charge fee(e) indicated below Cardit Card 177  For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  X Charge fee(e) indicated below Cardit Cardit Card 177  FEE CALCULATION  I. BASIC FILING, SEARCH, AND EXAMINATION FEES  FILING FEES  Samall Entity Fee (\$) Fee					Complete if Known						
FEE TRANSMITTAL For FY 2005  Applicant claims small entity status. See 37 CFR 1.27  Applicant claims small entity status. See 37 CFR 1.27  Art Unit 1661  TOTAL AMOUNT OF PAYMENT (\$) 1,520.00  Attomey Docket No. 559662000101  METHOD OF PAYMENT (check all that apply)  Check Credit Card Money Order None Other (please identify):  X Deposit Account Deposit Account Number 03-1952 peposit Account Name Morrison & Foerster LLP  For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  X Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee  X Credit any overpayments  FEE CALCULATION  1. BASIC FILING, SEARCH, AND EXAMINATION FEES  FILING FEES  Small Entity  Application Type Fee (s) Fee	$r_{i}$										
For FY 2005											
Applicant claims small entity status. See 37 CFR 1.27											
Applicant claims small entity status. See 37 CFR 1.27  TOTAL AMOUNT OF PAYMENT  (\$) 1,520.00  Attorney Docket No. 559862000101  METHOD OF PAYMENT (check all that apply)  Check Credit Card Money Order None Other (please identify):    Deposit Account Deposit Account Number: 03-1952 Deposit Account Number: 04-1952 Deposit Account Number: 05-1952 Depos		For FY 20	05								
METHOD OF PAYMENT	Applicant claims small entity status. See 37 CFR 1 27										
Check   Credit Card		•			7 tt Olik						
Check Credit Card Money Order None Other (please identify):    Deposit Account   Deposit Account   Deposit Account Number 03-1952   Deposit Account Number 04-1952   Deposit Number 04-					Attorney Docket No.						
Deposit Account   Deposit   Deposit Account   Deposit Account   Deposit Account   Deposit   Deposit Account   Deposit   Deposit Account   Deposit   Deposit Account   Deposit	METHOD OF F	PAYMENT (check	all that apply)								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)   X   Charge fee(s) indicated below   Charge fee(s) indicated below, except for the filing fee   X   Charge fee(s) indicated below, except for the filing fee   X   Charge fee(s) under 37 CFR 1.16 and 1.17     FEE CALCULATION   BASIC FILING, SEARCH, AND EXAMINATION FEES   SMAIL Entity   Small Entity   Smal	Check	Check Credit Card Money Order Other (please identify):									
Charge fee(s) indicated below   Charge fee(s) indicated below, except for the filing fee   X   Charge fee(s) under 37 CFR 1.16 and 1.17   X   Credit any overpayments   X   Credit   X   Credit any overpayments   X   Credit any overpayments   X	x Deposit Acco	Deposit Account I	Number: 03-1952	Deposit Acc	count Name:	Mor	rison & Foerst	ter LLP			
Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17   I. BASIC FILING, SEARCH, AND EXAMINATION FEES   Small Entity	For the al	oove-identified depo	sit account, the D	irector is	hereby authorize	ed to: (checl	k all that apply)				
Section   Sect	x Cha	rge fee(s) indicated	below		Charg	e fee(s) ind	icated below, ex	cept for th	e filing fee		
Application Type				ment of	x Credit	any overpa	yments				
Papel	FEE CALCULA	ATION									
Marchication Type   Fee (\$)   Fee	1. BASIC FILING	, SEARCH, AND EX	KAMINATION FE								
Application Type		FII		SE		EXAMIN					
Utility   300   150   500   250   200   100   0.00	Application Type	ne Fee (\$		Fee (\$		Fee (\$)		Fees P	aid (\$)		
Design   200   100   100   50   130   65   0.00								•			
Plant   200   100   300   150   160   80   0.00	•										
Reissue   300   150   500   250   600   300   0.00	_										
Provisional   200   100   0   0   0   0   0   0   0   0											
EXCESS CLAIM FEES  Each claim over 20 (including Reissues)  Each claim over 30 (including Reissues)  Each claim over 30 (including Reissues)  Each independent claim over 31 (including Reissues)  Multiple dependent claims  Fee (\$)								***************************************			
Fee Claim over 20 (including Reissues) Each claim over 3 (including Reissues) Each claim over 3 (including Reissues)  Multiple dependent claims  Total Claims  Extra Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  O.00  Indep. Claims  Extra Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  O.00  Indep. Claims  Extra Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  O.00  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  O.00  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  O.00  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  O.00  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  O.00  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  O.00  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  O.00  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  O.00  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  O.00  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  O.00  Indep. Claims  Extra Claims  Fee (\$)  Indep. Claims  Extra Claims  Fee (\$)  Indep. Claims  Fee (\$)  Fee Paid (\$)  O.00  Indep. Claims  Indep. Claims  Extra Claims  Fee (\$)  Indep. Claims  Fee (\$)  Fee Paid (\$)  O.00  Indep. Claims  Extra Claims  Fee (\$)  Indep. Claims  Fee (\$)  Fee Paid (\$)  O.00  Indep. Claims  Indep. Claims  Extra Claims  Fee (\$)  Indep. Claims  Indep. Claims  Fee (\$)  Indep. Claims  Fee (\$)  Indep. Claims  Indep											
Each claim over 20 (including Reissues)  Each independent claim over 3 (including Reissues)  Multiple dependent claims  Total Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  SAPPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  Fee (\$)  Fee Paid (\$)  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  Fee (\$)  Fee Paid (\$)  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  Fee (\$)  Fee Paid (\$)  Total Sheets  Fee Paid (\$)  1,020.00  4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filling surcharge): 1253; Extension for response within third month 1,020.00  1402; Filling a brief in support of an appeal  Registration No. (Altorney/Agent)		WIFEES									
Auditiple dependent claims    Total Claims   Extra Claims   Fee (\$)   Fee Paid (\$)   Multiple Dependent Claims		20 (including Reiss	ues)					50	25		
Multiple dependent claims  Total Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Multiple Dependent Claims  Fee (\$)  Fee Paid (\$)  0.00  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  SAPPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$2.50 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  Fee (\$)  Fee Paid (\$)  Cround up to a whole number) x  = 0.00  4. OTHER FEE(\$)  Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge):  1253; Extension for response within third month 1,020.00  1402; Filing a brief in support of an appeal  Registration No.  (Altorney/Agent) 29,959  Telephone (858) 720-5112		• •							100		
Total Claims    Extra Claims   Fee (\$)   Fee Paid (\$)   Pee (\$)   Fee Paid (\$)	•		,					360	180		
Indep. Claims   Extra Claims   Fee (\$)   Fee Paid (\$)   D.00			Fee (\$)	Fee	Paid (\$)	Mu	ıltiple Depende	ent Claims			
Indep. Claims   Extra Claims   Fee (\$)   Fee Paid (\$)					e (\$)	Fee Paid (\$)					
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets					<del></del>			0.00	_		
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets	Indep. Claims	Extra Claims	Fee (\$)						1		
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets		=	× = _		0.00						
- 100 = /50 (round up to a whole number) x = 0.00  4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): 1253; Extension for response within third month 1,020.00  1402; Filing a brief in support of an appeal 500.00  SUBMITTED BY  Signature  Registration No. (Attorney/Agent) 29,959 Telephone (858) 720-5112	listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50										
Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1253; Extension for response within third month 1,020.00 1402; Filing a brief in support of an appeal 500.00  SUBMITTED BY  Registration No. (Attorney/Agent) 29,959 Telephone (858) 720-5112	Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)										
Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): 1253; Extension for response within third month 1,020.00  1402; Filing a brief in support of an appeal 500.00  SUBMITTED BY  Signature Registration No. (Attorney/Agent) 29,959 Telephone (858) 720-5112			/50		_ (round <b>up</b> to a wh	ole number)	х				
Other (e.g., late filing surcharge): 1253; Extension for response within third month 1,020.00 500.00  SUBMITTED BY  Signature Registration No. (Attorney/Agent) 29,959 Telephone (858) 720-5112	•	•	n fee (no small er	ntity disc	count)			rees	Paid (\$)		
1402; Filing a brief in support of an appeal 500.00  SUBMITTED BY  Signature Registration No. (Attorney/Agent) 29,959 Telephone (858) 720-5112	4000 5 4 1111 6 1111111111111111111111111111										
Registration No. (Attorney/Agent) Telephone (858) 720-5112											
Registration No. (Attorney/Agent) Telephone (858) 720-5112	SUBMITTED BY										
	Signature	ate 4 Me	meel	5		29,959	Telephone	(858) 72	0-5112		
							Date	Date July 22, 2005			